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/	TILITY	Attorney Docket No.	SYM 307			
PATENT APPLICATION		First Inventor	Shmuel Shapira			
TRAN	ISMITTAL	Title	SYSTEM AND METHOD FOR			
(Only for new nonprovisional	al applications under 37 CFR 1.53(b))	Express Mail Label No.	EV 325398635 US			
	TION ELEMENTS ming utility patent application contents.	ADDRESS TO:	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450			
1. X Fee Transmittal Form (Submit an original and a Applicant claims small See 37 CFR 1.27. 3. X Specification (preferred arrangement single Program - Descriptive title of the incompart of the	duplicate for fee processing) entity status. [Total Pages1 et forth below) evention ated Applications ed sponsored R & D listing, a table, isting appendix ntion evention Drawings (if filed)	8. Nucleotide and/or Al (if applicable, all nec a. Computer b. Specificati i. CD- ii. Pape	mino Acid Sequence Submission ressary) Readable Form (CRF) rion Sequence Listing on: ROM or CD-R (2 copies); or			
4. X Drawing(s) (35 U.S.C. 113) [Total Sheets] 5. Oath or Declaration		10. X 37 CFR 3.73(t (when there is English Transl 12. Information Distatement (ID: Statement (ID: 13. Preliminary An Return Receip (Should be specified Copy (if foreign prior (b)(2)(B)(i). Ap or its equivaler	an assignee) Attorney lation Document (if applicable) isclosure Copies of IDS S)/PTO-1449 Citations mendment of Postcard (MPEP 503) ecifically itemized) of Priority Document(s) rify is claimed) in Request under 35 U.S.C. 122 oplicant must attach form PTO/SB/35			
18. If a CONTINUING APPLICA specification following the title, of	ATION, check appropriate box, and su or in an Application Data Sheet under	pply the requisite information 37 CFR 1 76:	below and in the first sentence of the			
Continuation			or application No.:			
Prior application information: Examiner Art Unit: For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS						
X Customer Number:			7			
At .	23581	OR L	Correspondence address below			
Name Jason C. Cre						
Address Kolisch Harty	vell, P.C. mhill Street, Suite 200					
City Portland	min Street, Suite 200	State Orogon	Zip Code 07304			
Country United States		Oregon	91204			
	Creasman ∕	Registration No. (Attorney)	(303) 293-0019			

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	375	.00
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spond to a collection of information unless it displays a valid OMB control number.					
Complete if Known					
Application Number					
Filing Date	September 19, 2003				
First Named Inventor	Shmuel Shapira				
Examiner Name					
Art Unit					
Attorney Docket No.	SYM 307				

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
Check Credit card Money Other None	3. ADDITIONAL FEES			
Deposit Account:	Large Entity Small Entity	•		
Deposit Account 11-1540	Fee Fee Fee Fee Description Code (\$)	Fee Paid_		
Number	1051 130 2051 65 Surcharge - late filing fee or oath			
Account Kolisch Hartwell, P.C.	1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet			
Name The Director is authorized to: (check all that apply)	1053 130 1053 130 Non-English specification			
Charge fee(s) indicated below	1812 2,520 1812 2,520 For filing a request for ex parte reexamination			
Charge any additional fee(s) during the pendency of this application	1804 920* 1804 920* Requesting publication of SIR prior to Examiner action			
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action			
FEE CALCULATION	1251 110 2251 55 Extension for reply within first month			
1. BASIC FILING FEE	1252 410 2252 205 Extension for reply within second month			
Large Entity Small Entity	1253 930 2253 465 Extension for reply within third month			
Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254 1,450 2254 725 Extension for reply within fourth month			
1001 7E0 2001 27E	1255 1,970 2255 985 Extension for reply within fifth month			
1001 750 2001 375 Offinity filing fee 375.00	1401 320 2401 160 Notice of Appeal			
1003 520 2003 260 Plant filing fee	1402 320 2402 160 Filing a brief in support of an appeal			
1004 750 2004 375 Reissue filing fee	1403 280 2403 140 Request for oral hearing			
1005 160 2005 80 Provisional filing fee	1451 1,510 1451 1,510 Petition to institute a public use proceeding			
SUBTOTAL (1) (\$) 375.00	1452 110 2452 55 Petition to revive - unavoidable			
	1453 1,300 2453 650 Petition to revive - unintentional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501 1,300 2501 650 Utility issue fee (or reissue)			
Total Claims 11 -20** = 0 x	1502 470 2502 235 Design issue fee			
Independent Co. Co.	1503 630 2503 315 Plant issue fee			
Claims	1460 130 1460 130 Petitions to the Commissioner			
	1807 50 1807 50 Processing fee under 37 CFR 1.17(q)			
Large Entity Small Entity Fee Fee Fee Fee Fee Description	1806 180 1806 180 Submission of Information Disclosure Stmt			
Code (\$) Code (\$)	8021 40 8021 40 Recording each patent assignment per property (times number of properties)			
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3	1809 750 2809 375 Filing a submission after final rejection (37 CFR 1.129(a))			
1203 280 2203 140 Multiple dependent claim, if not paid	1810 750 2810 375 For each additional invention to be examined (37 CFR 1.129(b))	****		
1204 84 2204 42 ** Reissue independent claims over original patent	1801 750 2801 375 Request for Continued Examination (RCE)			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802 900 1802 900 Request for expedited examination of a design application			
	Other fee (specify)			
SUBTOTAL (2) (\$) **or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)			
17 (47)				

SUBMITTED BY

Name (Print/Type)

Signature

(Complete (if applicable))

Registration No. (Attornev/Agent)

Signature

(Complete (if applicable))

Telephone

(503) 224-6655

Date

September 19, 2003

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